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Image# 201607159020610874

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X Fo	r Other Than	An Authorized	Committe	e			
<u> </u>	VDE OR PRINT -					Office Use Only	
1. NAME OF T COMMITTEE (in full)	YPE OR PRINT T		ample: If typing r the lines.	g, type	12FE4M5		
KENTUCKIANS FOR S	TRONG LEA	DERSHIP					
				1 1 1 1			I
ADDRESS (number and street)	P.O. BOX 7895						
Check if different					<u> </u>		
than previously reported. (ACC)	LOUISVILLE				KY _	40257	
2. FEC IDENTIFICATION NUM	/IBER ▼	CITY 🛦		S	STATE 🛦	ZIP CO	DE 🛦
C C00543256		3. IS THIS REPORT	× N	EW I) OR	AM (A)	IENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	N	lay 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	J	un 20 (M6)	Sep	20 (M9)	Year Only) Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	Jı	ul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
Quarterly Report (Q1)	(c) 12-Day	,	Primary (12P)		General ((12G)	Runoff (12R)
July 15 Quarterly Report (Q2)	PRE-E Report	lection for the:	Convention (1	2C)	Special (12S)	
October 15 Quarterly Report (Q3))	_	M M /	D D /	Y Y Y Y	in the	
January 31 Year-End Report (YE)		Election on				State o	f
July 31 Mid-Year Report (Non-election Year Only) (MY)		Election for the:	General (30G)	Runoff (3	0R)	Special (30S)
Termination Report (TER)		Election on	M = M /	D = D /	Y	in the State o	f
5. Covering Period 04	01	2016	through	M M M	30	2016	
I certify that I have examined this	Report and to the	ne best of my kno	wledge and b	elief it is true	e, correct and	complete.	
Type or Print Name of Treasurer	Michael G. Adam	ns					
Signature of Treasurer Michael	l G. Adams		[Electronically	Filed] Da	ate 07	15 /	2016
NOTE: Submission of false, erroneo	us, or incomplete	information may su	ubject the perso	on signing thi	s Report to th	ne penalties of 2 l	J.S.C. §437g.
Office						FEC FOR	M 3X
Use Only						Rev. 12/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)
Page 2

Write or Type Committee Name

KENTUCKIANS FOR STRONG LEADERSHIP 2016 06 30 2016 Report Covering the Period: 04 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 522890.39 January 1, 2016 (b) Cash on Hand at 333772.25 Beginning of Reporting Period..... 293354.10 343354.10 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 866244.49 627126.35 6(a) and 6(c) for Column B)..... 71356.68 310474.82 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 555769.67 555769.67 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 909.42 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

KENTUCKIANS FOR STRONG LEADERSHIP

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	250000.00	300000.00
(ii) Unitemized	0.00	, 0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	250000.00	300000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	40000.00	40000.00
(such as PACs)	7	
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	290000.00	340000.00
Totals to Line 33, page 5)	20000.00	
Party Committees	0.00	0.00
. 4.7 **********************************	7	
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	3354.10	3354.10
. Refunds of Contributions Made	, , , , , , , , , , , , , , , , , , , ,	
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	202	
(from Schedule H3)	0.00	0.00
	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	293354.10	343354.10
. Total Federal Receipts	202254.40	04005440
(subtract Line 18(c) from Line 19)▶	293354.10	343354.10

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
	g Expenditures: –	Total Tillo I cilou	Jaienda Tear-to-Date		
	cated Federal/Non-Federal vity (from Schedule H4)				
(i)	Federal Share	0.00	0.00		
/ **\	No. 5. houl Oliver	0.00	0.00		
(ii)	Non-Federal Shareer Federal Operating	0.00	0.00		
	enditures	71356.68	102083.54		
-	al Operating Expenditures		7		
	d 21(a)(i), (a)(ii), and (b))▶	71356.68	102083.54		
2. Transfer	s to Affiliated/Other Party				
Committ 3. Contribu	ees	0.00	0.00		
Federal	Candidates/Committees	0.00	0.00		
	er Political Committees	0.00	0.00		
-	dent Expenditures	0.00	0.00		
Coordina	ated Partv Expenditures	7 7 7			
(2 U.S.C (use Sch	C. §441a(d)) nedule F)	0.00	0.00		
	ř				
6. Loan Re	epayments Made	0.00	0.00		
7 . I N	to do	0.00	0.00		
8. Refunds	ladeof Contributions To:	3.00	7 7		
(a) Indi Tha	viduals/Persons Other In Political Committees	0.00	0.00		
(b) Poli	tical Party Committees	0.00	0.00		
(c) Oth	er Political Committees				
(suc	ch as PACs)	0.00	0.00		
(d) Tota	al Contribution Refunds				
` '	d Lines 28(a), (b), and (c))▶	0.00	0.00		
(44.	2 211100 20(4), (5), 4114 (6),				
9. Other D	isbursements	0.00	208391.28		
		, , , , , , , , , , , , , , , , , , , ,			
	Election Activity (2 U.S.C. §431(20))				
. ,	cated Federal Election Activity				
	m Schedule H6) Federal Share	0.00	0.00		
(1) 1	Cacial Citate				
(ii)	"Levin" Share	0.00	0.00		
(b) Fed	leral Election Activity Paid Entirely				
	With Federal Funds	0.00	0.00		
	al Federal Election Activity (add	0.00	0.00		
Lin	es 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
. Total Dis	sbursements (add Lines 21(c), 22,				
	25, 26, 27, 28(d), 29 and 30(c))	71356.68	310474.82		
-,,	. , , , , , , , , , , , , , , , , , , ,	, 1330.00	010-17-102		
2. Total Fe	deral Disbursements				
	t Line 21(a)(ii) and Line 30(a)(ii)				
from Lin	e 31)	71356.68	310474.82		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 20 1 01111 0X (1.0v. 02/2000)		i ago o
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	290000.00	340000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	290000.00	340000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	71356.68	102083.54
7. Offsets to Operating Expenditures (from Line 15, page 3)	3354.10	3354.10
3. Net Operating Expenditures (subtract Line 37 from Line 36)	68002.58	98729.44

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:			PAGE	-	6	OF	13		
(check only one)									
×	11a		11b		11c		12	2	
	13		14		15		16	6	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

UI	Tor commercial purposes, other than using the	name and address of any political committee to	SOIICIL COMMIDULIONS HOME SUCH COMMINILEE.
	NAME OF COMMITTEE (In Full) KENTUCKIANS FOR STRONG	LEADERSHIP	
	Full Name (Last, First, Middle Initial) DAVID A JONES Mailing Address 471 W MAIN ST. STE. 203 City LOUISVILLE FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State Zip Code KY 40202 C Occupation RETIRED Aggregate Year-to-Date ▼ 250000.00	Date of Receipt M
	Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period Memo Item
	Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	SUBTOTAL of Receipts This Page (optional)	>	250000.00
Т	OTAL This Period (last page this line number o	nly)	250000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 13 (check only one)								3	
for each category of the Detailed Summary Page		11a	01	11b	X	11c		12		
, 3		13		14		15		16	1	7
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.										
SHIP										

		tatements may not be sold or used by any person name and address of any political committee to	
	NAME OF COMMITTEE (In Full) KENTUCKIANS FOR STRONG	LEADERSHIP	
Α.	Full Name (Last, First, Middle Initial) The Republican Party of Kentucky		Date of Receipt
	Mailing Address 105 West Third Street		06 22 _ 2016
	City	State Zip Code	Transaction ID : SA11C.4318
	Frankfort	KY 40601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40000.00
	Name of Employer	Occupation	Memo Item In-kind: Non-Federal Polling
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	40000.00	
— В.	Full Name (Last, First, Middle Initial)		Date of Receipt
	Mailing Address		M M / D D / Y Y Y Y
	City	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С	7
	Name of Employer	Occupation	Memo Item
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼		
— С.	Full Name (Last, First, Middle Initial)		Date of Receipt
	Mailing Address		M = M / D = D / Y = Y = Y
	City	State Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	
	Name of Employer	Occupation	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SI	JBTOTAL of Receipts This Page (optional)		40000.00
т	OTAL This Period (last page this line number	only)	40000.00

S 17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 13 (check only one) 11a 11b 11c 12 13 14 X 15 16 17
	he name and address of any political commit	y person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JAMESTOWN ASSOCIATES Mailing Address 116 Craig Road City Manalapan FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code NJ 07726 C Occupation Aggregate Year-to-Date ▼ 3354.10	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) B. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Amount of Each Receipt this Period Memo Item
Full Name (Last, First, Middle Initial) C. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For:	State Zip Code C Occupation	Amount of Each Receipt this Period Memo Item
Primary General Other (specify)	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3354.10

3354.10

SCHEDULE B (FEC Form	, i				FOR LINE NUMBER: PAGE 9 OF 13 (check only one)				
ITEMIZED DISBURSEMEN	10		category of the Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30				
					on for the purpose of soliciting contributions o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) KENTUCKIANS FOR ST	RONG LEAD			sar commuce to	Solicit Continuations from Such Committee.				
Full Name (Last, First, Middle Initial) A. DINSMORE & SHOHL L					Date of Disbursement				
Mailing Address 255 EAST FIFTH ST					05 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State		Zip Code		Transaction ID : SB21B.4300				
CINCINNATI Purpose of Disbursement	ОН		45202						
Legal services					Amount of Each Disbursement this Period				
Candidate Name				Category/ Type	3118.46				
Office Sought: House Senate President		For: nary er (spe	General cify) ▼	.,,,,	Memo Item				
State: District:									
Full Name (Last, First, Middle Initial) B. MEGAN GRAETER					Date of Disbursement				
Mailing Address 7911 TOLLS LANE					06 10 2016				
City LOUISVILLE	State KY		Zip Code 40214		Transaction ID : SB21B.4306				
Purpose of Disbursement Administrative services				· · ·	Amount of Each Disbursement this Period				
Candidate Name				Category/ Type	250.00				
Office Sought: House Senate President State: District:		For: nary er (spe	General cify) ▼	.,,,,	Memo Item				
Full Name (Last, First, Middle Initial) C. INTEGRATED CAMPAIC		NS			Date of Disbursement				
Mailing Address 526 DAROCO AVE.	Mailing Address 526 DAROCO AVE.				06 03 7 2016				
City CORAL GABLES Purpose of Disbursement	State FL	9	Zip Code 33146		Transaction ID : SB21B.4304				
Fundraising services Candidate Name	Fundraising services				Amount of Each Disbursement this Period				
Candidate Name				Category/ Type	15000.00				
Office Sought: House Senate President State: District:		nary	General cify) ▼		Memo Item				
Senate President	Prim	nary			Memo Item				

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) KENTUCKIANS FOR STRONG LE	e and address of any political	by any perso	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)	ADEKONIY		
Mailing Address 2616 Pierce Ave.			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City S	State Zip Code IA 50010		Transaction ID : SB21B.4298
Purpose of Disbursement Web hosting Candidate Name		Category/ Type	Amount of Each Disbursement this Period 50.00
	nent For: Primary General Other (specify)		Memo Item
Full Name (Last, First, Middle Initial) 3. MERE LLC Mailing Address 2616 Pierce Ave.			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	state Zip Code IA 50010		Transaction ID : SB21B.4302 Amount of Each Disbursement this Period
		Category/ Type	50.00 Memo Item
Full Name (Last, First, Middle Initial) C. MERE LLC			Date of Disbursement
Mailing Address 2616 Pierce Ave. City S	state Zip Code		06 10 2016 Transaction ID : SB21B.4307
AMES Purpose of Disbursement Website hosting Candidate Name	IA 50010	Category/ Type	Amount of Each Disbursement this Period 50.00
	nent For: Primary General Other (specify)		Memo Item
SUBTOTAL of Disbursements This Page (optional)		······································	150.00
TOTAL This Period (last page this line number only).		·····	

SCHEDULE B (FEC Form 3X)	Han anneste et la C.C.	FOR LINE	OR LINE NUMBER: PAGE 11 OF 13			
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only				
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b			
Any information copied from such Departs and Chite	agenta may not be said as we					
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)						
KENTUCKIANS FOR STRONG LE	ADERSHIP					
Full Name (Last, First, Middle Initial)			B			
RUNSWITCH LLC			Date of Disbursement			
Mailing Address 9300 Shelbyville Rd. Suite 1005			04 11 2016			
City S Louisville	State Zip Code KY 40222		Transaction ID : SB21B.4299			
Purpose of Disbursement	40222					
Political consulting			Amount of Each Disbursement this Period			
Candidate Name		Category/	7500.00			
Office Coughts House	and Fam	Type	7300.00			
Office Sought: House Disbursen Senate	nent For: Primary General		Memo Item			
	Other (specify)					
State: District:	· · · · · · · · · · · · · · · · · · ·					
Full Name (Last, First, Middle Initial)						
3. RUNSWITCH LLC			Date of Disbursement			
Mailing Address 9300 Shelbyville Rd. Suite 1005			05 07 2016			
,	State Zip Code KY 40222		Transaction ID : SB21B.4301			
Purpose of Disbursement Travel reimbursement						
Candidate Name		السيا	Amount of Each Disbursement this Period			
Sandado Hamo		Category/ Type	319.76			
Office Sought: House Disbursen	nent For:	71	Memo Item			
	Primary General		_			
President State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
C. RUNSWITCH LLC			Date of Disbursement			
			M M / D D / Y Y Y Y			
Mailing Address 9300 Shelbyville Rd. Suite 1005			05 07 2016			
	State Zip Code		Transaction ID - CD04D 4000			
	KY 40222		Transaction ID: SB21B.4323			
Purpose of Disbursement Political Consulting			Amount of Each Disbursement this Period			
Candidate Name		Category/	Amount of Each Dispursement this Period			
		Type	2500.00			
Office Sought: House Disbursen			Memo Item			
	Primary General Other (specify) ▼		_			
State: District:	Carol (Specify)					
1						
SUBTOTAL of Disbursements This Page (optional)		·····•	10319.76			
TOTAL This Period (last nage this line number only)						

SCHEDULE B (FEC Form 3X)				PAGE 12 OF 13
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only o	22 23	24 25 26
		27	28a 28b	28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)				
KENTUCKIANS FOR STRONG LE	ADERSHIP			
Full Name (Last, First, Middle Initial)			D : (D:)	
A. RUNSWITCH LLC			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 9300 Shelbyville Rd. Suite 1005				
City	State Zip Code		Transaction ID :	SR21R /305
Louisville	KY 40222		Transaction ib .	3B21B. 4 303
Purpose of Disbursement Political consulting			Amount of Each D	Disbursement this Period
Candidate Name		Category/ Type		2500.00
	nent For: Primary General Other (specify)		Memo Item	
State: District:	(apa 3)			
Full Name (Last, First, Middle Initial)				
3. The Republican Party of Kentucky		Date of Disbursen		
Mailing Address 105 West Third Street		06 22 2016		
Frankfort	State Zip Code KY 40601		Transaction ID :	SB21B.4319
Purpose of Disbursement In-kind: Non-Federal Polling	1		Amount of Each Disbursement this Per	Disbursement this Period
Candidate Name		Category/ Type		40000.00
	nent For: Primary General Other (specify)	31	Memo Item	
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disbursen	nent
Mailing Address			M M / D D	/
City State Zip Code				
Purpose of Disbursement	ent Category/ Type			
Candidate Name				Disbursement this Period
	nent For: Primary General Other (specify)	.,,,,	Memo Item	
State: District:	•			
•		'		40500.00
SUBTOTAL of Disbursements This Page (optional)		······	7	42500.00
TOTAL This Period (last nage this line number only)				71338.22

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 13 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

13

NA!	ME OF COMMITTEE (In Full) ENTUCKIANS FOR STRONG LEA	DERSHIP	
	A. Full Name (Last, First, Middle Initial) of Debtor Chalmers Pak Burch & Adams I	Nature of Debt (Purpose): Legal Services	
	Mailing Address 75 14th Street NE, Ste. 2725		
- 1	City State Atlanta	Zip Code GA 30309	
	Outstanding Balance Beginning This Period		Transaction ID : SD10.4308
	0.00		
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	909.42	0.00	909.42
	B. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose):	
	Mailing Address		
	ivialing Address		
	City State	Zip Code	
	Outstanding Balance Beginning This Period Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address	Nature of Debt (Purpose):	
	City	State Zip Code	
	Outstanding Balance Beginning This Period Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1)	SUBTOTALS This Period This Page (optional)		909.42
2)	TOTALS This Period (last page this line number	only)	909.42
3)	TOTAL OUTSTANDING LOANS from Schedule C	C (last page only)	0.00
4)	ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only)	909.42